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PTO/SB/31 (02-01)

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 2183-4753US	
CERTIFICATE OF MAILING Express Mail Label Number: <u>EV326920980US</u> Date of Deposit: <u>December 10, 2004</u> Person Making Deposit: <u>Steve Wong</u>	In re Application of <u>Wouters et al.</u>		
	Application Number <u>09/780,205</u>		Filed <u>February 9, 2001</u>
	For ANTIBODIES FOR USE IN TARGETED AND TEMPORARY TREATMENT OF HUMANS AND ANIMALS		
	Group Art Unit <u>1644</u>	Examiner <u>M. Belyavskyi</u>	
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner.			
The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ <u>500.</u>			
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ <u>250.</u>			
<input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.			
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any deficiency in fees which may be required, or credit any overpayment to Deposit Account No. <u>20-1469</u> . I have enclosed a duplicate copy of this sheet.			
<input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the		 Signature	
<input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.		Allen C. Turner Reg. No. 33,041 _____ Typed or printed name	
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)			
<input checked="" type="checkbox"/> attorney or agent of record.		December 10, 2004 _____ Date	
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a).			
Registration number if acting under 37 CFR 1.34(a).			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			
<input checked="" type="checkbox"/> *Total of 1 forms are submitted.			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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